

I hereby certify that this correspondence is being electronically transmitted on the date noted below to:

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
March 12, 2008

Date of Deposit

Jon H. Beaupré, Reg. 54,729

Name of applicant, assignee or  
Registered Representative

/ Jon H. Beaupré/

Signature  
March 12, 2008

Date of Signature

Case No. 8627/227

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

Henrik S. Klint

Examiner: Foreman, J. M.

Serial No: 10/615,510

Group Art Unit: 3736

Filed: July 7, 2003

Conf. No.: 9194

For: ENDOVASCULAR MEDICAL  
DEVICE WITH PLURALITY OF  
WIRES

**PETITION AND FEE FOR EXTENSION OF TIME (37 CFR § 1.136(a))**

Mail Stop Amendment  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This is a petition for an extension of the time to respond to Office Action dated December 12, 2007 for a period of two months.

Applicant is: ☐ small entity (per 37 CFR 1.27) ☒ other than small entity

<u>Extension Months</u>	<u>Other Than Small Entity</u>	<u>Small Entity</u>
<input type="checkbox"/> One Month	\$120.00	\$60.00
<input checked="" type="checkbox"/> Two Months	\$460.00	\$230.00
<input type="checkbox"/> Three Months	\$1,050.00	\$525.00
<input type="checkbox"/> Four Months	\$1,640.00	\$820.00
<input type="checkbox"/> Five Months	\$2,230.00	\$1,115.00

**Payment Method:**

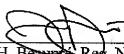
- ☐ Check in the amount of \$\_\_\_\_\_ is enclosed to cover the fees listed above.
- ☐ Payment by credit card in the amount of \$\_\_\_\_\_ to cover the fees listed above. Form PTO-2038 is enclosed for this purpose.

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

- ☒ The Commissioner is hereby authorized to charge \$460.00 to cover the fees listed above to Deposit Account No. 23-1925. If filed by mail, a duplicate copy of this paper is enclosed for this purpose.
- ☒ The Commissioner is hereby authorized to charge any deficiencies in fees or credit overpayment to Deposit Account No. 23-1925. If filed by mail, a duplicate copy of this paper is enclosed for this purpose.

Respectfully submitted,

Dated: March 12, 2008

  
 Jon H. Beaupre, Reg. No. 54,729  
 Attorney for Applicant

BRINKS HOFER GILSON & LIONE  
 P.O. BOX 10395  
 CHICAGO, IL 60610  
 (312) 321-4200